

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT <u>July 15, 2013</u>		2.a. NAME OF CANDIDATE OR COMMITTEE <u>COMMITTEE TO ELECT JIM FIELDS</u>	
2.b. IF COMMITTEE, NAME OF CANDIDATE <u>JAMES A. FIELDS</u>		3. ELECTION DATE <u>AUGUST 5, 2010</u>	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City State Zip Code Phone <u>PO BOX 15135 CHATTANOOGA TN 37405</u>			
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City State Zip Code Phone <u>3402A TAFT HIGHWAY SIGNAL MOUNTAIN TN 37377 423-886-5760</u>			
5. OFFICE SOUGHT (include district number, if applicable) <u>HAMILTON COUNTY COMMISSIONER DISTRICT 2</u>		6. NAME OF POLITICAL TREASURER (may be candidate) <u>THOMAS W. FRANCESCON, SR.</u>	
7. CATEGORY OR REPORT (Check one)			
<input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input checked="" type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL			
8.a. BEGINNING DATE OF REPORTING PERIOD <u>JANUARY 16, 2013</u>		8.b. ENDING DATE OF REPORTING PERIOD <u>JUNE 30, 2013</u>	
9. (Check one)			
a. <input checked="" type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. <input type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.			
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.			
<u>James A. Fields</u> signature of candidate		<u>Thomas W. Francescon, Sr.</u> signature of political treasurer	
<u>7/15/13</u> date		<u>7/15/13</u> date	
11. WITNESS SIGNATURE <u>[Signature]</u> signature of witness		<u>[Signature]</u> signature of witness	
<u>7/15/13</u> date		<u>7/15/13</u> date	
12. SUMMARY			
a. BALANCE ON HAND LAST REPORT		\$ <u>154.46</u>	
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>500.00</u>	
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>124.00</u>	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>530.46</u>	
e. TOTAL LOANS OUTSTANDING		\$ <u>-0-</u>	
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>-0-</u>	



# ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <b>COMMITTEE TO ELECT JIM FIELDS</b>		2. REPORT COVERING THE PERIOD FROM: <b>1/16/13</b> TO: <b>6/30/13</b>	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <b>-0-</b>
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name <b>ELIZABETH</b>		Middle Name <b>J.</b>	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)
Last Name/Organization Name <b>CLEM</b>			Amount of Contribution <b>\$500.00</b>
Address <b>4931 CHESTNUT AVENUE</b>			
City <b>SIGNAL MOUNTAIN</b>	State <b>TN</b>	Zip Code <b>37377</b>	Date of Contribution <b>2/14/13</b>
Occupation			Aggregate This Election <b>\$500.00</b>
Employer			
First Name		Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)
Last Name/Organization Name			Amount of Contribution
Address			
City	State	Zip Code	Date of Contribution
Occupation			Aggregate This Election
Employer			
First Name		Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)
Last Name/Organization Name			Amount of Contribution
Address			
City	State	Zip Code	Date of Contribution
Occupation			Aggregate This Election
Employer			
First Name		Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)
Last Name/Organization Name			Amount of Contribution
Address			
City	State	Zip Code	Date of Contribution
Occupation			Aggregate This Election
Employer			
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)			<b>\$500.00</b>

